

<u>IN THE UNITED STATES PATENT AND TRADEMARK OFFICE</u>

Applicate man W. Cates et al.

Title:

Filed:

CHRONICALLY-IMPLANTED DEVICE FOR SENSING AND THERAPY

Docket No.:

279.384US1

February 19, 2002

Examiner:

Scott M. Getzow

Serial No.: 10/079,056

Due Date: N/A

Group Art Unit: 3762

MS Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

We are transmitting herewith the following attached items (as indicated with an "X"):

 \underline{X} A return postcard.

X A Supplemental Information Disclosure Statement (2 pgs.), Form 1449 (1 pg.), and copies of 22 cited documents.

If not provided for in a separate paper filed herewith, Please consider this a PETITION FOR EXTENSION OF TIME for sufficient number of months to enter these papers and please charge any additional fees or credit overpayment to Deposit Account No. 19-0743.

SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.

Customer Number 21186

Atty: Marvin L. Beekman

Reg. No. 38,377

<u>CERTIFICATE UNDER 37 CFR 1.8:</u> The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this <u>3eo</u> day of January, 2005.

Name

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(GENERAL)

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S/N 10/079,056

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Adam W. Cates et al. Examiner:

Scott M. Getzow

rial No.:

10/079,056

Group Art Unit:

3762

filed:

February 19, 2002

Docket:

279.384US1

Title:

CHRONICALLY-IMPLANTED DEVICE FOR SENSING AND THERAPY

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 et. seq., the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicants respectfully request that this Supplemental Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicants request that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicants with the next official communication.

Pursuant to 37 C.F.R. §1.97(c)(2), Applicants hereby authorize the Commissioner to charge the fee of \$180.00, as set forth in 37 C.F.R. §1.17(p) to Deposit Account No. 19-0743. Filing Date: February 19, 2002

Title: CHRONICALLY-IMPLANTED DEVICE FOR SENSING AND THERAPY

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The Examiner is invited to contact the Applicants' Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

ADAM W. CATES ET AL.

By their Representatives,

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Name AMES KANYUSIK

Signature

PTO/SB/084(10-01)
Approved for use through 10/31/2002. OMB 561-0031
US Patent & Trademark Office, U.S. DEPARTMENT OF COMMERCE ed to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO Complete if Known INFORMATION DISCLOSURE 10/079,056 **Application Number** STATEMENT BY APPLICANT PE February 19, 2002 (Use as many sheets as necessary) Filing Date Cates, Adam **First Named Inventor** 3762 **Group Art Unit** JAN 0 5 2005 Getzow, Scott **Examiner Name** Attorney Docket No: 279.384US1 Sheet 1 of 1

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